Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Bring iden	e the name that is on a government-issued ure identification (for apple, your driver's use or passport). g your picture tification to your ting with the trustee.	Deborah First name Elizabeth Middle name Sands Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.	Deborah E Talbott	
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-7813	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
used in the last 8 years		I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	2536 Old Dufur Rd The Dalles, OR 97058 Number, Street, City, State & ZIP Code Wasco County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	Deborah Elizabeti	n Sands				Case number (if known)
Par			• •			
7.	The chapter of the Bankruptcy Code you are choosing to file under	(Form 2010	0)). Also,		ch, see <i>Notice Required by</i> and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box.
	-	Chapte	r 7			
		☐ Chapte	r 11			
		☐ Chapte	r 12			
		☐ Chapte	r 13			
8.	How you will pay the fee	abou orde	it how yo r. If your	ou may pay. Typically	, if you are paying the fee y	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with
		☐ I nee	ed to pay			on, sign and attach the Application for Individuals to Pay
I request that my fee be waived (You may request this option only if you are filing for Chap but is not required to, waive your fee, and may do so only if your income is less than 150%.						
		appli	es to yo	ur family size and you	are unable to pay the fee i	our income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		— 103.	District		When	Case number
			District		When	Case number
			District		When	Case number
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your	■ No.	Go to I	ine 12.		
	residence?		Has vo	ur landlord obtained	an eviction judgment agains	et vou?
		☐ Yes.		No. Go to line 12.	an eviction juagment again.	st you:
			_		tatament About an Eviation	Judgment Against Vou (Form 101A) and file it as part of
				this bankruptcy petit		Judgment Against You (Form 101A) and file it as part of

Deb	otor 1 Deborah Elizabeth	n Sands			Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor
				40 4 0010 1 10p110	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Chec	the appropriate bo	ox to describe your business:
	·			Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am r	ot filing under Chap	oter 11.
		□ No.	I am f Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	he hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Der	Deboran Elizabetr	Janus		Case number			
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or busines	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses		■ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99	1	5 001-10,000	5 0,001-100,000		
	one.	☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	be worth?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	\$1,000,000,001 - \$10 billion		
		`	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Par	t7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the	chapter of title 11, United States Code, spe	cified in this petition.		
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		Debora	orah Elizabeth Sands h Elizabeth Sands e of Debtor 1	Signature of Debto	or 2		
		Executed	d on August 6, 2019	Executed on			
			MM / DD / YYYY	MIV	I / DD / YYYY		

Debtor 1 Deborah Elizabet	h Sands	_ Cas	e number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United St for which the person is eligible. I also certify that I	ates Code, and have e	explained the relief available under each chapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, cer schedules filed with the petition is incorrect.	tify that I have no know	rledge after an inquiry that the information in the
	/s/ Christopher Kane Signature of Attorney for Debtor	Date	August 6, 2019 MM / DD / YYYY
	Christopher Kane Printed name		
	Upright Law, LLC		
	2207 NE Broadway St. Suite 100		
	Portland, OR 97232		

Email address

chris@ckanelaw.com

Contact phone **503-380-7822**

950863 OR Bar number & State

Voluntary Petition for Individuals Filing for Bankruptcy Case 19-32884-dwh7 Doc 1 Filed 08/06/19

United States Bankruptcy Court District of Oregon

In re	Deborah Elizabeth Sands	Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATT	TORNEY FOR D	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the a compensation paid to me within one year before the filing of the petition in bankrupe rendered on behalf of the debtor(s) in contemplation of or in connection with the	ptcy, or agreed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept	\$	1,850.00
	Prior to the filing of this statement I have received		1,850.00
	Balance Due		0.00
2. \$	335.00 of the filing fee has been paid.		
3. T	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4. T	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5. I	■ I have not agreed to share the above-disclosed compensation with any other pe	rson unless they are men	nbers and associates of my law firm.
[☐ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing in		
6. I	n return for the above-disclosed fee, I have agreed to render legal service for all as	spects of the bankruptcy	case, including:
b c	 Analysis of the debtor's financial situation, and rendering advice to the debtor in Preparation and filing of any petition, schedules, statement of affairs and plan were Representation of the debtor at the meeting of creditors and confirmation hearing. [Other provisions as needed] All services, except those identified in paragraph 7 below, that debtor's bankruptcy objectives including but not limited to: 	which may be required; ag, and any adjourned he	arings thereof;
	 (1) File the certificate required from the individual debtor from counseling agency for prepetition credit counseling; (2) Preparation and filing of all locally required forms; (3) Representation of the debtor at the § 341 meeting; (4) Amend any list, schedule, statement, and/or other documer necessary or appropriate; (5) Motions under § 522(f) to avoid liens on exempt property; (6) Motions, such as motions for abandonment, or proceedings (7) Advise the debtor with respect to any reaffirmation agreem agreements if in the best interest of the debtor; and attend all I signed by the debtor; (8) Removal of garnishments or wage assignments; (9) Negotiate, prepare and file reaffirmation agreements; (10) Motions under § 722 to redeem exempt personal property (11) Compile and forward to the trustee and the United States (12) Consult with the debtor and if there is a valid defense or e automatic stay; (13) File the debtor's certification of completion of instructions 	nt required to be filed s to clear title to real ent; negotiate, prepa hearings scheduled of from liens; trustee any documen xplanation, respond	property owned by the debtor; re and file reaffirmation on any reaffirmation agreements and information requested; to a motion for relief from the

By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Notwithstanding any agreement to the contrary, representation of the Debtor in any dischargeability action, adversary proceedings, or heavily litigated matters that are not listed in Paragraph 6 above.

(14) Disclose any agreement and fee arrangement regarding the potential retention of co-counsel.

(Official Form 423); and

In re	Deborah Elizabeth Sands	Case No.	
		 _	

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete st this bankruptcy proceeding.	tatement of any agreement or arrangement for payment to me for representation of the debtor(s) in
August 6, 2019	/s/ Christopher Kane
Date	Christopher Kane
	Signature of Attorney
	Upright Law, LLC
	2207 NE Broadway St.
	Suite 100
	Portland, OR 97232
	503-380-7822 Fax: 503-548-4026
	chris@ckanelaw.com
	Name of law firm

UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	DISTRICT OF O	OREGON
In re Deborah Elizabeth Sands) Case No.) CHAPTER	(If Known) R 7 INDIVIDUAL DEBTOR'S*
Debtor(s)) STATEME	ENT OF INTENTION(S) .S.C. §521(a)
IMPORTANT NOTICES TO DEBTOR(S):		
1.Complete, sign and file this form even if you have no debected tors are listed, make sure the certificate of service is contact.		erty of the estate or personal property subject to unexpired leases. If
2. Failure to perform the intentions as to property stated belo	ow within 30 days a	after the first date set for the Meeting of Creditors
under 11 USC §341(a) may result in relief for the creditor fr	om the Automatic S	Stay protecting such property.
additional pages is necessary.) ☐ IF NONE - Check this box.	must be fully comp	pleted for each debt which is secured by property of the estate. Attach
Property No. 1		
Creditor's Name: Ally Financial		Describe Property Securing Debt: 2014 GMC Sierra 1500 Double Cab SLT
If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain (for example, avoid lien using 11 USC Property is (check one): ☐ CLAIMED AS EXEMPT		D AS EXEMPT
☐ IF NONE - Check this box.		
Property No. 2		
Creditor's Name: Harley Davidson Financial		Describe Property Securing Debt: 2017 Harley-Davidson 3-Wheeler FLHTCUTG Triglide Ultra Classic
Property will be (check one): ☐ SURRENDERED ■ F	RETAINED	
If retaining the property, I intend to (check at least one):		
Redeem the property		
Reaffirm the debt		
☐ Other. Explain (for example, avoid lien using 11 USC	§522(f)	<u></u>
Property is (check one): ■ CLAIMED AS EXEMPT □	☐ NOT CLAIMED	D AS EXEMPT

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 $\hfill \square$ IF NONE - Check this box.

Property No. 3		D 11 D 1 C	. D.14	
Creditor's Name: Mrc/United Wholesale M		Describe Property Securing Debt: 2536 Old Dufur Rd The Dalles, OR 97058 Wasco County Personal Residence		
Property will be (check one): ☐ SURRENDERED	■ RETAINED			
If retaining the property, I intend to (check at least or Redeem the property	ne):			
Reaffirm the debt				
☐ Other. Explain (for example, avoid lien using 11	USC §522(f)			
Property is (check one): CLAIMED AS EXEMP	T	IED AS EXEMPT		
PART B - Personal property subject to unexpired leasuages if necessary.)	ses. (All three columns	s of Part B must be completed	for each unexpired le	ase. Attach additional
IF NONE - Check this box.				
Property No. 1			1	
Lessor's Name:	Describe Leased Pro	operty:	§365(p)(2)	ed pursuant to 11 US
			☐ YES	□NO
Continuation sheets attached (if any).				
I DECLARE UNDER PENALTY OF PERJURY THAT 'I INDICATES INTENTION AS TO ANY PROPERTY O SECURING A DEBT AND/OR PERSONAL PROPERT AN UNEXPIRED LEASE.	F MY ESTATE	I/WE, THE UNDERSIGNED DOCUMENT AND LOCAL CREDITOR NAMED ABO	<u>FORM #715</u> WERE SE	
DATE: August 6, 2019		DATE: August 6, 2019	<u> </u>	
/s/ Deborah Elizabeth Sands		/s/ Christopher Kane		950863 OR
			SIGNATURE	950863 OR OSB# (if attorney)
DEBTOR'S SIGNATURE		/s/ Christopher Kane		OSB# (if attorney)
DEBTOR'S SIGNATURE		/s/ Christopher Kane DEBTOR OR ATTORNEY'S JOINT DEBTOR'S SIGNATOR		OSB# (if attorney)
DEBTOR'S SIGNATURE		/s/ Christopher Kane DEBTOR OR ATTORNEY'S JOINT DEBTOR'S SIGNATOR	URE (If applicable and 1 03-380-7822	OSB# (if attorney)
DEBTOR'S SIGNATURE		JOINT DEBTOR'S SIGNATU Christopher Kane 50 PRINT OR TYPE SIGNER'S 2207 NE Broadway St. Suite 100	URE (If applicable and 1 03-380-7822	OSB# (if attorney)
JOINT DEBTOR'S SIGNATURE (If applicable)		JOINT DEBTOR'S SIGNATU Christopher Kane 50 PRINT OR TYPE SIGNER'S 2207 NE Broadway St.	JRE (If applicable and n 13-380-7822 NAME & PHONE NO	OSB# (if attorney)

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

QUESTIONS????

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

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		s intorma	ation to identify your					
Deb	otor 1		Deborah Elizabet	th Sands Middle Name	Last Name			
	otor 2 use if, f	iling)	First Name	Middle Name	Last Name			
'		•	ruptcy Court for the:	DISTRICT OF OREGO				
			ruptey Court for the.	DISTRICT OF CREGO	•			
(if kn	e nur	mber					_	ck if this is an ended filing
Off	ficia	al Fori	m 106Sum					
				and Liabilities ar	nd Certain Statistica	I Information		12/15
infor	rmati	on. Fill οι	ıt all of your schedul	es first; then complete th	are filing together, both are e ne information on this form. If k the box at the top of this pa	you are filing amend		
Part	t 1:	Summar	ize Your Assets					
								assets e of what you own
1.			B: Property (Official F				\$	261,000.00
							· —	· · · · · · · · · · · · · · · · · · ·
							\$_	50,247.00
	1c. (Copy line	63, Total of all propert	y on Schedule A/B			\$	311,247.00
Part	t 2:	Summar	ize Your Liabilities					
								liabilities unt you owe
2.				claims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of P	art 1 of Schedule D	\$_	308,410.00
3.				Unsecured Claims (Officia 1 (priority unsecured claim	l Form 106E/F) is) from line 6e of <i>Schedule E/F</i>	=	\$_	0.00
	3b. (Copy the	total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule	E/F	\$	120,402.14
						Your total liabilities	\$	428,812.14
Part	t 3:	Summar	rize Your Income and	d Expenses				
4.			our Income (Official Fo		· I		\$	4,320.90
5.			our Expenses (Officianthly expenses from I				\$_	4,313.60
Part	t 4:	Answer	These Questions for	Administrative and Stati	stical Records			
6.	Are □	-		er Chapters 7, 11, or 13? ton this part of the form. C	heck this box and submit this fo	orm to the court with yo	ur other s	chedules.
7.	■ Wha	Yes at kind of	debt do you have?					
					debts are those "incurred by an g for statistical purposes. 28 U.		a person	al, family, or
			bts are not primarily with your other scheo		ve nothing to report on this part	of the form. Check this	s <i>box</i> and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,720.45

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	2,387.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,387.00

	Deborah Elizab						
Debtor 2	First Name	Middle	Name	Last Name			
Spouse, if filing)	First Name	Middle	Name	Last Name			
nited States B	sankruptcy Court for the	DISTRICT	OF ORE	EGON			
ase number							☐ Check if this is a amended filing
official Fo	orm 106A/B						
chedu	le A/B: Pro	perty					12/15
□ No. Go to Pa ■ Yes. Where	art 2.		.,	ence, building, land, or similar property?			
	To the property.						
	, , ,		What	is the property? Check all that apply			
	I Dufur Rd s, if available, or other description	on	What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
2536 Old Street address	I Dufur Rd s, if available, or other description	7058-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va	of any secure Who Have Clair lue of the perty?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
2536 Old Street address	I Dufur Rd s, if available, or other description			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Current va entire prop \$26 Describe t (such as fe	of any secure Who Have Clair lue of the perty? 61,000.00 he nature of y	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0
2536 Old Street address The Dalle City	I Dufur Rd s, if available, or other description	7058-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire prop \$26 Describe t (such as fe	of any secure. Who Have Clair lue of the perty? 61,000.00 the nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0
2536 Old Street address	I Dufur Rd s, if available, or other description	7058-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$26 Describe t (such as fe a life estate	of any secure. Who Have Clair lue of the perty? 61,000.00 the nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0
2536 Old Street address The Dalke City Wasco	I Dufur Rd s, if available, or other description	7058-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$26 Describe t (such as fr a life estat Fee Sim	lue of the perty? 61,000.00 the nature of yee simple, ten e), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0
2536 Old Street address The Dalke City Wasco	I Dufur Rd s, if available, or other description	7058-0000	Who l	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this it	Current vaentire prop \$26 Describe t (such as fra a life estat Fee sim Check (see ins	lue of the perty? 61,000.00 he nature of yee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0 Your ownership interest ancy by the entireties, o
2536 Old Street address The Dalke City Wasco	I Dufur Rd s, if available, or other description	7058-0000	Who l	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this it	Current vaentire prop \$26 Describe t (such as fra a life estat Fee sim Check (see ins	lue of the perty? 61,000.00 he nature of yee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0 Tour ownership interest ancy by the entireties, c
2536 Old Street address The Dalke City Wasco	I Dufur Rd s, if available, or other description	7058-0000	Who l	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this it	Current vaentire prop \$26 Describe t (such as fra a life estat Fee sim Check (see ins	lue of the perty? 61,000.00 he nature of yee simple, ten e), if known. ple	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$261,000.0 Tour ownership interest ancy by the entireties, c

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt	or 1 Deborah Elizabeth Sands		Case number (if known)	
. Ca	ırs, vans, trucks, tractors, sport utility v	ehicles, motorcycles		
_		•		
	No			
	Yes			
3.1	Make:	Who has an interest in the property? Check one		red claims or exemptions. Put ecured claims on Schedule D:
	Model:	Debtor 1 only		e Claims Secured by Property.
	Year:	Debtor 2 only	Current value of the	ne Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
	2014 GMC Sierra 1500 Double	_	\$04.000	00 000 00
	Cab SLT	☐ Check if this is community property (see instructions)	\$21,682.	90 \$21,682.00
		(see instructions)		
			Do not doduct cook	red claims or exemptions. Put
3.2	Make:	Who has an interest in the property? Check one		ecured claims on Schedule D:
	Model:	Debtor 1 only	Creditors Who Have	e Claims Secured by Property.
	Year:	Debtor 2 only	Current value of th	e Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	2017 Harley-Davidson	_	\$19,750.	00 \$19,750.00
	3-Wheeler FLHTCUTG Triglide Ultra Classic	LI Check if this is community property (see instructions)	φ19,730.	<u> </u>
	Ultra Classic	(oss manusins)		
Δ	dd the dollar value of the nortion you o	wn for all of your entries from Part 2, including	any entries for	
.pa	ages you have attached for Part 2. Write	that number here	=>	\$41,432.00
art :	B: Describe Your Personal and Household	Items		
	ou own or have any legal or equitable i			Current value of the
,	ou onn or navo any rogar or oquitation			portion you own?
				Do not deduct secured claims or exemptions.
Нс	ousehold goods and furnishings			ыанна от ехетприон s .
E	xamples: Major appliances, furniture, linen	s, china, kitchenware		
	No			
	Yes. Describe			
	Γ			*
	Household Go	ods and Furnishings		\$1,000.00
_				
Ele	ectronics			
E	•	deo, stereo, and digital equipment; computers, prir	nters, scanners; music co	llections; electronic devices
_	including cell phones, cameras,	media players, games		
	No			
	Yes. Describe			
	Electronics			\$500.00
	Licotromos			
_	Heatibles of value			
	ollectibles of value vamples: Antiques and figurines: paintings	, prints, or other artwork; books, pictures, or other	art objects: stamp_coin_a	or baseball card collections.
_	other collections, memorabilia, c		a objecto, starrip, com,	Jacoban dara donodiono,
	No			
	INO			

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Official Form 106A/B

Best Case Bankruptcy

page 2

Schedule A/B: Property

Debtor 1	Deborah Elizabeth S	Sands	Case number (if known	1)
	ent for sports and hobbi			
Exampi ■ No	les: Sports, photographic, musical instruments	exercise, and other hobby	equipment; bicycles, pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools;
☐ Yes.	Describe			
10. Fireari Exami	ms ples: Pistols, rifles, shotgui	ns, ammunition, and relate	ed equipment	
☐ Yes.	Describe			
11. Clothe Examp □ No		s, leather coats, designer	wear, shoes, accessories	
■ Yes.	Describe			
	Clothi	ng		\$200.00
□ No		stume jewelry, engageme	nt rings, wedding rings, heirloom jewelry, watches, gems	, gold, silver
	Jewel	rv		\$2,000.00
Exam _i ■ No	arm animals ples: Dogs, cats, birds, hor	rses		
	Describe	hald itawa waw did nat a	lready list, including any health aids you did not list	
■ No	Give specific information.		meady list, including any health alds you did not list	
			including any entries for pages you have attached	\$3,700.00
Part 4: De	escribe Your Financial Asset	s		
Do you ov	wn or have any legal or e	quitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have in y		n a safe deposit box, and on hand when you file your pet	ition
Exam _l			certificates of deposit; shares in credit unions, brokerage the same institution, list each.	e houses, and other similar
□ No ■ Yes.			Institution name:	
	17.1.	Checking	Rivermark Credit Union Checking Account, #5470 (ID 2)	\$5,105.00
	47.0	Savings	Rivermark Credit Union Savings Account, #5470 (ID 1)	\$5.00
	17.2.	Javings	10-110 (ID-1)	

Case 19-32884-dwh7 Doc 1 Filed 08/06/19 page 3

Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

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D	ebtor 1 Deborah Eliza	abeth S	Sands	Case number (if known)	
		17.3.	Other financial account	Venmo Account, zero balance	\$0.00
		17.4.	Savings	Rivermark Credit Union Savings Account, #5470 (ID 3)	\$5.00
18	Bonds, mutual funds, o			serage firms, money market accounts	
	■ No □ Yes		Institution or issuer na	ame:	
19	Non-publicly traded sto joint venture	ck and	interests in incorpor	rated and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No				
	☐ Yes. Give specific info		about them ne of entity:	 % of ownership:	
20	Negotiable instruments i	nclude p	ersonal checks, cash	iable and non-negotiable instruments iers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
	☐ Yes. Give specific infor		about them uer name:		
21	Retirement or pension a Examples: Interests in IF No			3(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	☐ Yes. List each account		ely. of account:	Institution name:	
22		deposit	s you have made so t	hat you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications companies	s, or others
	■ No □ Yes			Institution name or individual:	
23		a perio	dic payment of money	to you, either for life or for a number of years)	
	■ No	·		, ,	
	YesIss	uer nam	e and description.		
24	Interests in an education 26 U.S.C. §§ 530(b)(1), 55 ■ No			alified ABLE program, or under a qualified state tuition progr	am.
	* * *	titution r	name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	
25	Trusts, equitable or futu	ure inte	rests in property (oth	ner than anything listed in line 1), and rights or powers exerc	sable for your benefit
	☐ Yes. Give specific info	rmation	about them		
26				d other intellectual property s from royalties and licensing agreements	
	☐ Yes. Give specific info	rmation	about them		
27	_ ' ' ' '			s prative association holdings, liquor licenses, professional licenses	
	■ No☐ Yes. Give specific info	rmation	about them		
M	oney or property owed to	you?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

Debto	r 1	Deborah Elizabeth Sands		Case number (if known)	
_		unds owed to you			
		Give specific information about them, including whether you alr	eady filed the retur	rns and the tax years	
E ■	xamp No	support oles: Past due or lump sum alimony, spousal support, child support Give specific information	port, maintenance,	divorce settlement, property	settlement
<i>E</i>	xamp No	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability be benefits; unpaid loans you made to someone else Give specific information	nefits, sick pay, va	cation pay, workers' compe	nsation, Social Security
	хатр	ts in insurance policies bles: Health, disability, or life insurance; health savings account	(HSA); credit, hom	neowner's, or renter's insurar	nce
		Name the insurance company of each policy and list its value. Company name:	Bene	eficiary:	Surrender or refund value:
lf so ■	you a omeo No	terest in property that is due you from someone who has deare the beneficiary of a living trust, expect proceeds from a life in the has died. Give specific information	ied nsurance policy, or	r are currently entitled to rec	eive property because
E	<i>xamp</i> No	against third parties, whether or not you have filed a laws bles: Accidents, employment disputes, insurance claims, or right Describe each claim		nand for payment	
34. O f		contingent and unliquidated claims of every nature, includi	ng counterclaims	of the debtor and rights to	set off claims
	Yes.	Describe each claim			
35. A ı	-	ancial assets you did not already list			
		Give specific information			
		he dollar value of all of your entries from Part 4, including art 4. Write that number here			\$5,115.00
Part 5	Des	scribe Any Business-Related Property You Own or Have an Interes	t In. List any real est	tate in Part 1.	
_		own or have any legal or equitable interest in any business-related	property?		
_		to Part 6.			
ЦΥ	es. G	So to line 38.			
Part 6		scribe Any Farm- and Commercial Fishing-Related Property You Or ou own or have an interest in farmland, list it in Part 1.	wn or Have an Intere	est In.	
_		own or have any legal or equitable interest in any farm- or	commercial fishi	ng-related property?	
_	_	. Go to line 47.			

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Official Form 106A/B Schedule A/B: Property page 5

Den	Deboran Elizabeth Sands		Case number (# known)	
_	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$261,000.00
56.	Part 2: Total vehicles, line 5	\$41,432.00		
57.	Part 3: Total personal and household items, line 15	\$3,700.00		
58.	Part 4: Total financial assets, line 36	\$5,115.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$50,247.00	Copy personal property total	\$50,247.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$311,247.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this information to identify your case:						
Debtor 1	Deborah Elizabet	h Sands				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	DISTRICT OF OREGON				
Case number				☐ Check if this is an		
				amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	2536 Old Dufur Rd The Dalles, OR 97058 Wasco County	\$261,000.00		\$7,271.00	11 U.S.C. § 522(d)(1)			
	Personal Residence Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	Ellie Holli Gelledale PAB. G.1			100% of fair market value, up to any applicable statutory limit				
	Electronics Line from Schedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)			
	Line Holli Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit				
	Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)			
	Line Holli Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit				
	Jewelry Line from Schedule A/B: 12.1	\$2,000.00		\$1,600.00	ORS § 18.345(1)(b)			
	Elio Holli Gollovale PVD. 12.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtoi	or 1 Deborah Elizabeth Sands	orah Elizabeth Sands Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Jewelry Line from <i>Schedule A/B</i> : 12.1	\$2,000.00		\$400.00	ORS § 18.345(1)(p)
•	Elle Holli Gonedule /V.B. 1-11			100% of fair market value, up to any applicable statutory limit	
	Checking: Rivermark Credit Union Checking Account, #5470 (ID 2)	\$5,105.00		\$5,105.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings: Rivermark Credit Union Savings Account, #5470 (ID 1)	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: Rivermark Credit Union Savings Account, #5470 (ID 3)	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
- 1	No				
ı	☐ Yes. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No	-		•	
	☐ Yes				

Fill in this inforn	nation to identify you	r case:				
Debtor 1	Deborah Elizabe	th Sands Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	DISTRICT OF OREGON				
Case number						if this is an led filing
Official Form Schedule		Who Have Claims	Secure	d by Propert	у	12/15
		two married people are filing togetl ut, number the entries, and attach it				
,	have claims secured by	your property?				
′	•	is form to the court with your other	r schedules. \	You have nothing else t	o report on this form.	
_		•	r corrodatos.	rou navo noumig oloo t	o report or time remi.	
	all of the information b	elow.				
Part 1: List Al	I Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the created a particular claim, list the other creditor		Amount of claim	Value of collateral	Unsecured
		al order according to the creditor's nan		Do not deduct the	that supports this	portion
2.4 Ally Einan	ocial	Describe the property that secures	the claim:	value of collateral.	claim \$21,692,00	If any
2.1 Ally Finan Creditor's Name		Describe the property that secures 2014 GMC Sierra 1500 Doub SLT		\$25,690.00	<u>\$21,682.00</u>	\$4,008.00
Po Box 38	kruptcy Dept 80901 ton, MN 55438	As of the date you file, the claim is: apply. Contingent	Check all that			
Number, Street,	, City, State & Zip Code	☐ Unliquidated				
Who owes the de	bt? Check one.	Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or se	ecured		
Debtor 2 only		car loan)				
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	ne debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this cle community de		Other (including a right to offset)	Security I	nterest-Vehicle		
	Opened 03/18 Last Active					

Date debt was incurred 5/29/19

2873

Last 4 digits of account number

טפט	tor 1 Deborah E	Ilizabeth Sand Middle N		ase number (_{if known})		
	-					
2.2	Harley Davidso Financial	on	Describe the property that secures the claim:	\$28,991.00	\$19,750.00	\$9,241.00
	Creditor's Name		2017 Harley-Davidson 3-Wheeler			
	Atta Danlar		FLHTCUTG Triglide Ultra Classic			
	Attn: Bankrupt Po Box 22048	cy	As of the date you file, the claim is: Check all that			
	Carson City, N	V 89721	apply. Contingent			
	Number, Street, City, S		☐ Unliquidated			
		.a.o a 2.p oodo	☐ Disputed			
Who	o owes the debt? C	heck one.	Nature of lien. Check all that apply.			
	Debtor 1 only		☐ An agreement you made (such as mortgage or secu	red		
_	Debtor 2 only		car loan)			
	Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	at least one of the deb		☐ Judgment lien from a lawsuit			
	Check if this claim re community debt	lates to a	Other (including a right to offset) Security Interest	erest-Vehicle		
Date	e debt was incurred	Opened 08/18 Last Active 4/25/19	Last 4 digits of account number 9293			
2.3	Mrc/United Wh	olesale M	Describe the property that secures the claim:	\$253,729.00	\$261,000.00	\$0.00
	Creditor's Name		2536 Old Dufur Rd The Dalles, OR			
			97058 Wasco County			
	8950 Cypress	Waters	Personal Residence			
	Blvd. Ste. 100		As of the date you file, the claim is: Check all that apply.			
	Coppell, TX 75					
		019	☐ Contingent			
	Number, Street, City, S	tate & Zip Code	Unliquidated			
Who	o owes the debt? C	tate & Zip Code				
_	o owes the debt? C	tate & Zip Code	☐ Unliquidated ☐ Disputed	red		
	o owes the debt? Co	tate & Zip Code	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.	red		
	o owes the debt? Co Debtor 1 only Debtor 2 only	tate & Zip Code	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secure car loan)	red		
	o owes the debt? Co	tate & Zip Code heck one. only	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secure)	red		
	Do owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	tate & Zip Code heck one. only tors and another	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secur car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)	red		
	Do owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 at least one of the deb Check if this claim re	tate & Zip Code heck one. only tors and another	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secur car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	red		
	Dowes the debt? Copettor 1 only Debtor 2 only Debtor 1 and Debtor 2 at least one of the deb Check if this claim recommunity debt	only tors and another lates to a Opened 04/19 Last Active	□ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secur car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) Mortgage	red		
Date	Dowes the debt? Copetion 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim recommunity debt	only tors and another lates to a Opened 04/19 Last Active 5/31/19	□ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secur car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) Mortgage Last 4 digits of account number 9443		1	
Date	Do owes the debt? Copetion 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim recommunity debt The debt was incurred	only tors and another lates to a Opened 04/19 Last Active 5/31/19	□ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secur car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) Mortgage	\$308,410.		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill ir	n this information to identify yo	ur case.			
Debte					
_ 0.0.1	First Name	Middle Nam	e Last Name		
Debte					
(Spous	se if, filing) First Name	Middle Nam	e Last Name		
Unite	d States Bankruptcy Court for the	DISTRICT OF	OREGON		
Case	number				
(if knov					☐ Check if this is an
					amended filing
Offic	cial Form 106E/F				
	edule E/F: Creditors	Who Have L	Insecured Claims		12/15
ny ex	complete and accurate as possible, ecutory contracts or unexpired lea: ule G: Executory Contracts and Un	ses that could result	in a claim. Also list executory	contracts on Schedule A/B: Prope	erty (Official Form 106A/B) and on
Sched eft. At	ule D: Creditors Who Have Claims tach the Continuation Page to this and case number (if known).	Secured by Property.	If more space is needed, copy	the Part you need, fill it out, numl	ber the entries in the boxes on the
Part		Unsecured Claims	5		
	o any creditors have priority unsec				
	No. Go to Part 2.				
_	Yes.				
_	103.				
Part :	2: List All of Your NONPRIO	RITY Unsecured C	laims		
3. D	o any creditors have nonpriority un	secured claims agai	nst you?		
	No. You have nothing to report in th	is part. Submit this for	m to the court with your other sch	nedules.	
	Yes.				
u th	ist all of your nonpriority unsecured nsecured claim, list the creditor separate none creditor holds a particular claim art 2.	ately for each claim. Fo	or each claim listed, identify what	type of claim it is. Do not list claims	already included in Part 1. If more
	art Z.				Total claim
4.1	Amex	Li	ast 4 digits of account number	9163	\$2,053.00
	Nonpriority Creditor's Name		· -9		
	Correspondence/Bankru	•		Opened 08/16 Last Acti	ve
	Po Box 981540	W	hen was the debt incurred?	6/23/19	
	El Paso, TX 79998 Number Street City State Zip Code	<u> </u>	s of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check o		o oo uuto youo,o o.u	To Onlook all trial apply	
	Debtor 1 only		Contingent		
	Debtor 2 only		1 Unliquidated		
	☐ Debtor 1 and Debtor 2 only		Disputed		
	☐ At least one of the debtors and	_	ype of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a co		Student loans		
	debt	_	Obligations arising out of a sep	aration agreement or divorce that yo	u did not
	Is the claim subject to offset?		port as priority claims	•	
	■ No		Debts to pension or profit-shari	ng plans, and other similar debts	
	☐ Yes		Other, Specify Credit Care	d	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Deborah Elizabeth Sands		Case number (if known)	
4.2	Bank Of America	Last 4 digits of account number	3555	\$4,144.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 05/16 Last Active 5/02/19	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Citi/Sears	Last 4 digits of account number	4136	\$4,212.00
	Nonpriority Creditor's Name Citibank/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 01/17 Last Active 5/01/19	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim i	s. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify Credit Card	<u> </u>	
4.4	Citibank North America	Last 4 digits of account number	0130	\$2,072.00
	Nonpriority Creditor's Name Citibank Corp/Centralized		Opened 12/18 Last Active	
	Bankruptcy Po Box 790034 St Lovie MO 62470	When was the debt incurred?	5/01/19	
-	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Deborah Elizabeth Sands		Case number (if known)	
4.5	Citibank/Best Buy Nonpriority Creditor's Name	Last 4 digits of account number	2172	Unknown
	Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179	When was the debt incurred?	Opened 11/09/12 Last Active 10/04/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.6	Citibank/The Home Depot	Last 4 digits of account number	5749	\$6,432.00
	Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 08/18 Last Active 5/01/19	
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.7	Comenity Bank/Wayfair Nonpriority Creditor's Name	Last 4 digits of account number	0896	\$3,069.00
	Attn: Bankruptcy Dept Po Box 182125	When was the debt incurred?	Opened 04/18 Last Active 5/02/19	
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 44.0 704 , 4 0.44	C. C	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	Deborah Elizabeth Sands		Case number (if know	vn)	
4.8	Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	0421	_	\$1,313.00
	Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 04/17 5/03/19	Last Active	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or di	vorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sim	ilar debts	
	☐ Yes	Other. Specify			
		Educationa	ı		
4.9	Dept of Ed / Navient	Last 4 digits of account number	0421		\$573.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 04/17 5/03/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	,	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or di	vorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sim	ilar debts	
	Yes	Other. Specify			
		Educationa	ı		
4.1	Dept of Ed / Navient	Last 4 digits of account number	1203		\$220.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 12/08 5/03/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	,	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or di	vorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other sim	ilar debts	
	☐ Yes	Other. Specify			
		Educationa	ıl		

Schedule E/F: Creditors Who Have Unsecured Claims

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tor 1 Deborah Elizabeth Sands		Case number (if known)	
Dept of Ed / Navient	Last 4 digits of account number	1203	\$145.00
Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 12/08 Last Active 5/03/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al	
Dept of Ed / Navient Nonpriority Creditor's Name	Last 4 digits of account number	1021	\$79.0
Attn: Claims Dept Po Box 9635	When was the debt incurred?	Opened 10/09 Last Active 5/03/19	
Wilkes Barr, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Educationa	al	
Dept of Ed / Navient	Last 4 digits of account number	1021	\$57.0
Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 10/09 Last Active 5/03/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a plane and other similar dele-	
■ No	☐ Debts to pension or profit-sharin	ig pians, and other similar debts	
☐ Yes	☐ Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

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Deborah Elizabeth Sands				
Discover Financial	Last 4 digits of account number	3435	\$3,407.00	
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 11/17 Last Active 5/02/19		
Number Street City State Zip Code	As of the date you file, the claim			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	aration agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	Other. Specify Credit Card	1		
GC Services Limited Partnership	Last 4 digits of account number	0144	\$655.00	
Nonpriority Creditor's Name 6330 Gulfton	When was the debt incurred?		<u> </u>	
Houston, TX 77081 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts		
Yes	■ Other. Specify Assigned A Court, Citat	Account for LA County Superior tion No. HY005569		
Lab Corp	Last 4 digits of account number	0681	\$35.00	
Nonpriority Creditor's Name 550 17th Ave. Ste. 300	When was the debt incurred?			
Seattle, WA 98122 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community debt	☐ Student loans	aration agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims	aradon agreement of divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	■ Other. Specify Medical Se	rvices		

Schedule E/F: Creditors Who Have Unsecured Claims

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LendingClub	Last 4 digits of account number	7216	\$22,686.00
Nonpriority Creditor's Name Attn: Bankruptcy 71 Stevenson St, Ste 1000	When was the debt incurred?	Opened 11/18 Last Active 4/23/19	
San Francisco, CA 94105 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	• ,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Unsecured		
Marti L. Mitchell DO	Last 4 digits of account number	7001	\$720.00
Nonpriority Creditor's Name Po Box 292	When was the debt incurred?		
_andisville, PA 17538 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Medical Se	rvices	
Mid-Columbia Medical Center	Last 4 digits of account number	6946	\$240.14
Nonpriority Creditor's Name	When was the debt incurred?		· · · · · · · · · · · · · · · · · · ·
Fhe Dalles, OR 97058 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	O continuent		
Debtor 1 only Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other. Specify Medical Se		

Schedule E/F: Creditors Who Have Unsecured Claims

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Deborah Elizabeth Sands		Case number (if known)	
Mid-Columbia Medical Center	Last 4 digits of account number		\$360.0
Nonpriority Creditor's Name 1700 East 19th St. The Dalles, OR 97058	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Medical Se		
Nordstrom FSB	Last 4 digits of account number	2573	\$1,234.0
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Po Box 6555	When was the debt incurred?	Opened 09/85 Last Active 5/02/19	
Englewood, CO 80155	when was the dept incurred?	3/02/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	Other Specify Credit Card	1	
Nordstrom Signature Visa	Last 4 digits of account number	5475	\$7,021.0
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Po Box 6555	When was the debt incurred?	Opened 12/17 Last Active 5/02/19	
Englewood, CO 80155	When was the dept incurred:	3/02/19	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	Student loans		
ls the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other Specify Credit Card		

Schedule E/F: Creditors Who Have Unsecured Claims

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Deborah Elizabeth Sands	Case number (if known)			
One Community Health	Last 4 digits of account number	1917	\$13.0	
Nonpriority Creditor's Name 849 Pacific Ave	When was the debt incurred?			
Hood River, OR 97031 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	7.5 0 4 , 6	or chost an unit apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
□Yes	Other. Specify Medical Se	rvices		
Progressive Leasing	Last 4 digits of account number	1269	\$250.0	
Nonpriority Creditor's Name	_			
256 Data Dr. Draper, UT 84020	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.		,		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify Loan			
Reliable Credit Association	Last 4 digits of account number	0169	\$1,208.0	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 22829	When was the debt incurred?	Opened 03/10 Last Active 1/20/15		
Milwaukee, OR 97269				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
_				
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated			
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
☐ At least one of the deptors and another ☐ Check if this claim is for a community	Student loans			
□ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify Loan			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 9 of 12

Deborah Elizabeth Sands	·	Case number (if known)				
SIc Conduit I LIc	Last 4 digits of account number	1320	Unknowr			
Nonpriority Creditor's Name Citibank USA, N.A Po Box 6191 Sioux Falls, SD 57117	When was the debt incurred?					
Number Street City State Zip Code	As of the date you file, the claim i					
Who incurred the debt? Check one.						
■ Debtor 1 only □ Contingent □						
Debtor 2 only	Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.				
☐ At least one of the debtors and another	<u></u> '	i claim:				
Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
No	Debts to pension or profit-sharin	g plans, and other similar debts				
☐ Yes	Other. Specify					
	Educationa	l				
Synchrony Bank/ JC Penneys Nonpriority Creditor's Name	Last 4 digits of account number	7169	\$509.00			
Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 03/17 Last Active 5/02/19				
Orlando, FL 32896 Tumber Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
■ No	Debts to pension or profit-sharin	s to pension or profit-sharing plans, and other similar debts				
□Yes	Other. Specify Charge Acc	count				
Synchrony Bank/Care Credit	Last 4 digits of account number	2467	\$1,500.00			
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/16 Last Active 5/02/19				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt	Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims	a plane and other similar delete				
■ No	Debts to pension or profit-sharin	• •				
Yes	■ Other. Specify Charge Acc	count				

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 12

Debtor	1 Deborah	Elizabeth Sands	Case number (if known)					
4.2 9	Synchrony	Bank/Chevron	Last 4 digits of account numbe	r 017	5		\$2,564.00	
	Nonpriority Cred Attn: Bank Po Box 965	ruptcy Dept	When was the debt incurred?	Ope 5/14	ned 04/15 Las /19	st Active		
	Orlando, FL Number Street	_ 32896 City State Zip Code	As of the date you file, the clair	n is: Ched	ck all that apply			
	_	the debt? Check one.						
	Debtor 1 onl	•	Contingent					
	Debtor 2 onl	•	Unliquidated					
	Debtor 1 and	•	☐ Disputed					
	_	of the debtors and another	Type of NONPRIORITY unsecut ☐ Student loans	red claim:	•			
	☐ Check if thi debt	is claim is for a community	_			46-4		
		bject to offset?	☐ Obligations arising out of a se report as priority claims					
	■ No		Debts to pension or profit-sha					
	☐ Yes		Other. Specify Charge Account					
4.3		Depot Project Loan	Last 4 digits of account numbe	r 9649	9		\$53,631.00	
			When was the debt incurred?	Ope 5/02	ned 09/18 Las //19	st Active		
	85092 Richmond, Number Street	VA 23286 City State Zip Code	As of the date you file, the clair	n is: Ched	ck all that apply			
	Who incurred t	the debt? Check one.						
	■ Debtor 1 on	ly	☐ Contingent					
	Debtor 2 onl	ly	☐ Unliquidated					
	Debtor 1 and	•	Disputed					
		of the debtors and another	Type of NONPRIORITY unsecu	red claim:	•			
	debt	s claim is for a community	☐ Student loans ☐ Obligations arising out of a se	paration a	greement or divorc	e that you did not		
	_	bject to offset?	report as priority claims Debts to pension or profit-sha	rina nlana	and ather similar	dobto		
	■ No			_	, and other similar t	Jebis		
	Yes		Other. Specify Unsecure	a				
is tryii have i	nis page only if y ng to collect fro more than one c	m you for a debt you owe to sor creditor for any of the debts that in Parts 1 or 2, do not fill out or	pout your bankruptcy, for a debt that neone else, list the original creditor you listed in Parts 1 or 2, list the ad submit this page.	in Parts 1 ditional c	1 or 2, then list the reditors here. If yo	e collection agency h	ere. Similarly, if you	
	nd Address Junty Superio		On which entry in Part 1 or Part 2 did yo .ine 4.15 of (<i>Check one):</i>		-	ority Unsecured Claims		
LA County Superior Court Beverly Hills Courthouse 9355 Burton Way			′			npriority Unsecured Cl		
Bever	ly Hills, CA 9		ast 4 digits of account number					
Part 4:	Add the A	mounts for Each Type of Un	secured Claim					
6. Total		certain types of unsecured clain	ns. This information is for statistica	l reporting	g purposes only. 2	28 U.S.C. §159. Add t	he amounts for each	
					Tota	al Claim		
Total	6a.	Domestic support obligations		6a.	\$	0.00		
claims	art 1 CL	Toyon and partoin other delta	you awa tha gayarrent	C h	Φ.	0.00		
from Pa	ort 1 6b.	Taxes and certain other debts Claims for death or personal in	you owe the government njury while you were intoxicated	6b. 6c.	\$ 	0.00 0.00		
	6d.	•	ecured claims. Write that amount here.	6d.	\$	0.00		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 12

Debtor 1 Deborah Elizabeth Sands

Case number (if known)

				,	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total	6f.	Student loans	6f.	\$	Total Claim 2,387.00
claims from Part	2 6g. 6h. 6i.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount here.	6g. 6h. 6i.	\$ \$ \$	0.00 0.00 118,015.14
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	120,402.14

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 12

Fill in this infor	mation to identify your	case:			
Debtor 1	Deborah Elizabeth Sands]	
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number (if known)					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Jodi Lauritsen
2536 Old Dufur Rd.
The Dalles, OR 97058

State what the contract or lease is for

HUD Rental Agreement with Tenant, expires 6/1/2020

Fill in thi	s information to identify you	r case:			
Debtor 1	Deborah Elizabe	eth Sands			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	DISTRICT OF OREGO	N		
Case nun	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Co	debtors			12/15
fill it out, your nam		e boxes on the left. Attac n). Answer every question	h the Additional Page to 1.	o this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
■ No					
Arizo	na, California, Idaho, Louisian				y states and territories include
	o. Go to line 3. es. Did your spouse, former sp	ouse, or legal equivalent liv	e with you at the time?		
in lin Form	e 2 again as a codebtor only	/ if that person is a guara	ntor or cosigner. Make s	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				_ Schedule D, lin	e
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lin	
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

	in this information	4-:					ſ				
	in this information of the state of the stat		zabeth Sands								
	otor 2 buse, if filing)					_					
Uni	ted States Bankru	ptcy Court for the	DISTRICT OF OREG	ON							
	se number			-			□ A		ed filing ent showing	g postpetition Illowing date:	chapter
0	fficial Form	า <u>106l</u>					M	M / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/15
spo atta	use. If you are se ch a separate she	parated and you eet to this form. (be Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not inclu	ıde inforr	natio	on about	your spo imber (if	ouse. If mo known). A	re space is	needed,
	If you have more	than one ioh		■ Employed				☐ Empl		9 -	
	attach a separate information about employers.	e page with	Employment status	☐ Not employed				□ Not e	•		
			Occupation	Caregiver							
	Include part-time self-employed w		Employer's name	State of Oregor	n, DHS						
	Occupation may or homemaker, i		Employer's address	3641 Klindt Driv The Dalles, OR							
			How long employed t	here? <u>2018-p</u>	resent			_			
Esti spot	mate monthly incuse unless you are	e separated.	ate you file this form. If ore than one employer, co	,	•					•	· ·
	e space, attach a s						For Deb		For Dek	otor 2 or	
2.			ry, and commissions (becalculate what the monthle		2.	\$	2,	256.10	non-filii	ng spouse	
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	s Income. Add lin	e 2 + line 3.		4.	\$	2,25	56.10	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

				For	Debtor 1	For Debtor		
	Сору	r line 4 here	4.	\$	2,256.10	\$	N/A	
5.	l iet s	all payroll deductions:						
Э.			Eo	\$	272.20	c	NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ _	373.38	\$ \$	N/A N/A	
	50. 5c.	Voluntary contributions for retirement plans	5c.	» \$	0.00	\$		
		Required repayments of retirement fund loans		\$ _	0.00	· · · · · · · · · · · · · · · · · · ·	N/A	
	5d.	Insurance	5d.	\$ 	0.00	\$	N/A	
	5e. 5f.		5e. 5f.	\$ _	0.00	\$ \$	N/A	
		Domestic support obligations Union dues		\$ _	0.00	φ	N/A	
	5g.		5g.		40.82	. ¢	N/A	
_	5h.	Other deductions. Specify:	_ 5h.+	_		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	414.20	\$	N/A	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,841.90	\$	N/A	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	1,714.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$ -	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Ψ_	0.00	Ψ	IN/A	
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A_	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Renter payment towards utilities	8h.+	· · —	250.00	+ \$	N/A	
		Son - Harley Loan Payment	_	\$_	515.00	\$	N/A	
9.	Adda	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,479.00	\$	N/A	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,320.90 + \$_	N/A	= \$4,	,320.90
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not affy:	depen	•	•	ed in <i>Schedul</i>	le J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines					\$4,	,320.90
13.	Do yo	ou expect an increase or decrease within the year after you file this form No.	?				Combined monthly in	
	_	Yes. Explain: Debtor's income from HUD and Renter just began	n in .lı	ılv 20	119			

Official Form 106l Schedule I: Your Income page 2

Fill	I in this information to identify your case:				
Deb	btor 1 Deborah Elizabeth Sands		Che	ck if this is:	
				An amended filing	
	btor 2				ving postpetition chapter
(Spo	pouse, if filing)			13 expenses as of	the following date:
Unit	ited States Bankruptcy Court for the: DISTRICT OF OREGON			MM / DD / YYYY	
Cas	se number				
(If k	known)				
O	Official Form 106J				
S	chedule J: Your Expenses				12/15
Be info	e as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this fumber (if known). Answer every question.				r supplying correct
iiui	mber (ii kilowii). Aliswer every question.				
	Describe Your Household				
1.	Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	hold of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.			_	☐ Yes
					□ No
		-			☐ Yes
					□ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include ■ No				□ res
٠.	expenses of people other than				
	yourself and your dependents?				
Par	art 2: Estimate Your Ongoing Monthly Expenses				
exp	stimate your expenses as of your bankruptcy filing date unless your penses as of a date after the bankruptcy is filed. If this is a suppliplicable date.				
	clude expenses paid for with non-cash government assistance if e value of such assistance and have included it on Schedule I: Yo				
	fficial Form 106l.)	our moome		Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	e 4. :	\$	1,780.60
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	50.00
_	4d. Homeowner's association or condominium dues			\$	0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5.	\$	0.00

Debtor 1 Deborah	Elizabeth Sands	Case num	ber (if known)	
6. Utilities:				
	, heat, natural gas	6a.	\$	180.00
•	wer, garbage collection	6b.	\$	120.00
	e, cell phone, Internet, satellite, and cable services	6c.	\$	
6d. Other. Sp		6d.	·	140.00 0.00
	ekeeping supplies	od. 7.	\$	
			·	600.00
	children's education costs	8.	\$	0.00
	lry, and dry cleaning	9.	\$	200.00
•	products and services	10.	\$	100.00
Medical and de	•	11.	\$	50.00
•	Include gas, maintenance, bus or train fare.	12.	\$	250.00
Do not include c		13.	· ·	
	clubs, recreation, newspapers, magazines, and books		\$	0.00
	ributions and religious donations	14.	\$	200.00
5. Insurance.	sources and destand from your pay or included in lines 4 or 20			
15a. Life insura	nsurance deducted from your pay or included in lines 4 or 20	15a.	•	0.00
			·	0.00
15b. Health ins		15b.	·	0.00
15c. Vehicle in		15c.	·	126.00
15d. Other insu		15d.	\$	0.00
	nclude taxes deducted from your pay or included in lines 4 o		c	
Specify:		16.	\$	0.00
7. Installment or I		47-	•	547.00
	ents for Vehicle 1	17a.	·	517.00
' '	ents for Vehicle 2	17b.	\$	0.00
17c. Other. Sp		17c.	·	0.00
17d. Other. Sp	·	17d.	\$	0.00
	of alimony, maintenance, and support that you did not		¢.	0.00
	your pay on line 5, Schedule I, Your Income (Official For	m 106l).	·	
	s you make to support others who do not live with you.	40	\$	0.00
Specify:	anto company and the body of the Body Alan Backship Company	19.		
	erty expenses not included in lines 4 or 5 of this form of			0.00
	s on other property	20a.	·	0.00
20b. Real esta		20b.	·	0.00
	homeowner's, or renter's insurance	20c.	·	0.00
	nce, repair, and upkeep expenses	20d.	·	0.00
20e. Homeowr	ner's association or condominium dues	20e.		0.00
. Other: Specify:		21.	+\$	0.00
) Calculate	monthly expenses			
2. Calculate your 22a. Add lines 4	monthly expenses		•	4 242 00
	<u> </u>	1061.0	\$	4,313.60
	2 (monthly expenses for Debtor 2), if any, from Official Form	100J-2	\$	
22c. Add line 22	a and 22b. The result is your monthly expenses.		\$	4,313.60
Calculate your	monthly net income.			
-	12 (your combined monthly income) from Schedule I.	23a.	\$	4,320.90
	r monthly expenses from line 22c above.	23b.		4,313.60
230. Copy you	i monuny expenses nom ine 220 above.	230.	-Ψ	4,313.00
23c Subtract v	your monthly expenses from your monthly income.			
	t is your monthly net income.	23c.	\$	7.30
1110 100011	,		L	
4. Do you expect	an increase or decrease in your expenses within the yea	r after you file this	form?	
	ou expect to finish paying for your car loan within the year or do you	expect your mortgage	payment to increase	or decrease because of a
	terms of your mortgage?			
No.				
☐ Yes.	Explain here:			

Fill in this infor	mation to identify your	case.		
Debtor 1	Deborah Elizabet			
	First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number				
(if known)				☐ Check if this is an amended filing
f two married po ou must file thi	eople are filing togethers	r, both are equally responsile bankruptcy schedules on connection with a bankr		
- G	n Below ny or agree to pay some	eone who is NOT an attorn	ey to help you fill out bankrupto	cy forms?
■ No				
☐ Yes. I	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the summ	nary and schedules filed with th	is declaration and
X /s/ Det	oorah Elizabeth Sand	ls	X	
Debora	ah Elizabeth Sands ire of Debtor 1		Signature of Debtor 2	
Date	August 6, 2019		Date	
_	<u> </u>			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in this infor	mation to identify you	r case:			
Debtor 1	Deborah Elizabe				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON			
Case number					
(if known)				-	Check if this is an amended filing
					amended ming
Official Fo	rm 107				
		Affairs for Individ	luals Filing for B	ankruntov	4/19
information. If n number (if know	nore space is needed n). Answer every que	ible. If two married people a attach a separate sheet to t stion. arital Status and Where You	this form. On the top of an		
			Lived Before		
1. What is you	ır current marital statı	us?			
☐ Married					
■ Not ma	rried				
2. During the I	last 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
Yes. Lis	st all of the places you	lived in the last 3 years. Do no	ot include where you live now	I.	
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
1627 Cact Richland,	tus Loop WA 99352	From-To: 12/2015-2/201 7	Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and territor No Yes. Ma	ries include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev hedule H: Your Codebtors (Of	vada, New Mexico, Puerto R		
Part 2 Expla	in the Sources of Fot	ii iiicoille			
Fill in the total	al amount of income yo	mployment or from operating ru received from all jobs and a have income that you receive	ill businesses, including part	-time activities.	endar years?
□ No					
Yes. Fil	Il in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,000.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affa	airs for Individuals Filing for B	ankruptcy	page 1

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Best Case Bankruptcy

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last calendar year: anuary 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$76,972.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
5.	Did you receive any other incom Include income regardless of whet and other public benefit payments winnings. If you are filing a joint call List each source and the gross income No	ther that income is taxable. Exa ; pensions; rental income; intelese and you have income that y	amples of other income are a rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; a nly once under Debtor 1.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	om January 1 of current year until e date you filed for bankruptcy:	Grandmother Rent	\$6,300.00		
		HUD Rent	\$814.00		
		Rental Income	\$250.00		
	or last calendar year: anuary 1 to December 31, 2018)	Retirement Payout per divorce decree	\$13,065.00		
		Alimony	\$30,000.00		
		Grandmother Rent	\$10,800.00		
	or the calendar year before that: anuary 1 to December 31, 2017)	Alimony	\$30,000.00		
		Grandmother Rent	\$10,800.00		
Pa	art 3: List Certain Payments You	u Made Before You Filed for	Bankruptcv		
6.	Are either Debtor 1's or Debtor 2		r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. §	01(8) as "incurred by an
	During the 90 days bef ☐ No. Go to line	ore you filed for bankruptcy, di	id you pay any creditor a total	of \$6,825* or more?	
	☐ Yes List below paid that c	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support oblig		

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

btor 1 De	eborah Elizal	beth Sands		Cas	se number (if known)	
Yes.			ve primarily consumer ded for bankruptcy, did you		al of \$600 or more	?
	□ No. (Go to line 7.				
	■ Yes L	ist below each credi	domestic support obligation			you paid that creditor. Do not Also, do not include payments to
Creditor'	's Name and A	Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Attn: Ba	me Depot Pr ankruptcy de VA-RVW-	oject Loan 6290 PO Box	5/2019	\$856.00	\$53,631.00	☐ Mortgage ☐ Car
85092 Richmo	ond, VA 2328	6				□ Credit Card□ Loan Repayment□ Suppliers or vendors□ Other
Insiders in of which ye a business	nclude your relation	atives; any general pa er, director, person ir	n control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog g securities; and a	was an insider? bu are a general partner; corpora ny managing agent, including or ns, such as child support and
Insiders in of which you a business alimony.	nclude your relation	atives; any general pa er, director, person ir	artners; relatives of any gent control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corpora ny managing agent, including or
Insiders in of which year a business alimony.	oclude your rela ou are an office s you operate a	atives; any general pa er, director, person ir	artners; relatives of any gent control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corpora ny managing agent, including or
Insiders in of which you a business alimony. No Yes.	oclude your rela ou are an office s you operate a	atives; any general parent par	artners; relatives of any gent control, or owner of 20%	eneral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corpora ny managing agent, including or
Insiders in of which ye a business alimony. No Yes. Insider's Within 1 yinsider?	clude your relation are an office s you operate at List all payment Name and Active relationship with the control of the contr	atives; any general parer, director, person in as a sole proprietor. And the to an insider. Iddress The total insider and the total insider.	artners; relatives of any gent control, or owner of 20% 11 U.S.C. § 101. Include p	eneral partners; partners; partners or more of their voting ayments for domestic fo	erships of which yog securities; and a support obligation Amount you still owe	ou are a general partner; corpora ny managing agent, including on ns, such as child support and
Insiders in of which ye a business alimony. No Yes. Insider's Within 1 y insider? Include pa	clude your relation are an office s you operate a List all payment Name and Active relationship with the control of the contro	atives; any general parer, director, person in as a sole proprietor. And the to an insider. Iddress The total insider and the total insider.	artners; relatives of any gent control, or owner of 20% 11 U.S.C. § 101. Include purpose of payment and payment toy, did you make any payment and paym	eneral partners; partners; partners or more of their voting ayments for domestic fo	erships of which yog securities; and a support obligation Amount you still owe	ou are a general partner; corpora ny managing agent, including or ns, such as child support and Reason for this payment
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Insiders in of which ye a business alimony. No Yes. Insider's Within 1 yinsider? Include particulate particulate in Yes. Insider's Within 1 yes. Insider's	List all payments Name and Active all payments on det List all payments	atives; any general parer, director, person in as a sole proprietor. And the storage and insider. In the storage and insider. In the storage and insider and insider and insider. In the storage and insider and insider.	Dates of payment Dates of payment tcy, did you make any passigned by an insider. Dates of payment cons, and Foreclosures tcy, were you a party in a	Total amount paid Total amount paid Total amount paid Total amount paid	Amount you still owe Amount you still owe Amount you still owe any property on a	ny are a general partner; corpora ny managing agent, including or ns, such as child support and Reason for this payment account of a debt that benefite Reason for this payment Include creditor's name
Insiders in of which ye a business alimony. No Yes. Insider's Within 1 yinsider? Include pa No Yes. Insider's Insider's No Yes. Insider's	List all paymer Name and Ac year before yo ayments on det List all paymer Name and Ac year before yo ayments on det List all paymer Name and Ac year before yo chayments on det	atives; any general parer, director, person in as a sole proprietor. And the sole proprietor. And the sole proprietor and the sole proprietor. And the sole proprietor and the sole proprietor.	Dates of payment Dates of payment tcy, did you make any passigned by an insider. Dates of payment cons, and Foreclosures tcy, were you a party in a	Total amount paid Total amount paid Total amount paid Total amount paid	Amount you still owe Amount you still owe Amount you still owe any property on a	rative proceeding?
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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

Debtor 1

Official Form 107

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Deborah Elizabeth Sands

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Best Case Bankruptcy

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for bankruptcy, ar	ny safe deposit box or other deposit	ory for securities,
	■ No			
	No Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any propert	ry you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	rt 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	s anniv		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su Site means any location, facility, or property as to own, operate, or utilize it, including disposa	r local statute or regulation concern air, land, soil, surface water, ground ubstances, wastes, or material. s defined under any environmental l	water, or other medium, including s	tatutes or
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	waste, hazardous substance, toxic	substance,
Rep	oort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
		Lii Godej		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	Deborah Elizabeth Sands		Case number (if known)	
26.	Have	you been a party in any judicial or ad	Iministrative proceeding under any envi	vironmental law? Include settlements and orders.	
		No			
		Yes. Fill in the details.			
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case Status of the case	ie
Pai	rt 11:	Give Details About Your Business or	r Connections to Any Business		
27.	With	in 4 years before you filed for bankrup	otcy, did you own a business or have ar	ny of the following connections to any business?	
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	, either full-time or part-time	
		☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	hip (LLP)	
		☐ A partner in a partnership			
		☐ An officer, director, or managing ex	xecutive of a corporation		
		☐ An owner of at least 5% of the voti	ng or equity securities of a corporation	1	
		No. None of the above applies. Go to	Part 12.		
		Yes. Check all that apply above and fi	II in the details below for each business	ss.	
		iness Name	Describe the nature of the business	Employer Identification number	
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITI	N.
				Dates business existed	
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	otcy, did you give a financial statement	to anyone about your business? Include all financi	al
		No			
		Yes. Fill in the details below.			
	Nan	ne Iress	Date Issued		
		ber, Street, City, State and ZIP Code)			
Pa	rt 12:	Sign Below			
are with	true a	nd correct. I understand that making a		nd I declare under penalty of perjury that the answe , or obtaining money or property by fraud in connec 0 years, or both.	
		orah Elizabeth Sands	Signature of Debtor 2		
		n Elizabeth Sands e of Debtor 1	Signature of Deptor 2		
Da	te A	ugust 6, 2019	Date		
Did ■ N	-	ttach additional pages to Your Statem	nent of Financial Affairs for Individuals I	Filing for Bankruptcy (Official Form 107)?	
	⁄es				
Did ■ N		ay or agree to pay someone who is no	ot an attorney to help you fill out bankru	uptcy forms?	
		ame of Person Attach the Bankr	ruptcy Petition Preparer's Notice, Declaration	tion, and Signature (Official Form 119).	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court District of Oregon

In re	Deborah Elizabeth Sands		Case No.	Case No.	
		Debtor(s)	Chapter	7	
	VED	IEICATION OE CDEDITOD M	IATDIV		
	VERIFICATION OF CREDITOR MATRIX				
The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and con-	rect to the best	of his/her knowledge.	
Date:	August 6, 2019	/s/ Deborah Elizabeth Sands			
		Deborah Elizabeth Sands			

Signature of Debtor